

(REFERENCE COPY - Not for submission)

Noncommercial Broadcast Stations Biennial Ownership Report (FCC Form 323-E)

File Number: 0000048534 | Submit Date: 2018-03-12 | FRN: 007180607

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 03/12/2018

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0007180607	Southeastern Oklahoma State University

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
425 W. University BLVD	Durant	ОК	74701	+1 (580) 745- 2290	dmclain@se. edu

2. Contact Representative

Name	Organization	
Dell McLain	Southeastern Oklahoma State University	

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
425 W. University BLVD	Durant	OK	74701	+1 (580) 745-2290	dmclain@se.edu

3. Application Filing Fee

Not Applicable

4. Control of Respondent

	(a) Provide the following information about the Respondent:				
Relationship to stations/permits Licensee					
	Is the Respondent's governing board (or other governing entity) directly or indirectly under the control of another entity?		No		

(b) Provide the following information about this report:		
Purpose	Biennial	
"As of" date	10/01/2017	
	When filing a biennial ownership report or validating and resubmitting a prior biennial ownership report, this date must be Oct. 1 of the year in which this report is filed.	

and Station(s)

Respondent is filing this report to cover the following Licensee(s) and station(s):

Licensee/Permittee Name	FRN
Southeastern Oklahoma State University	0007180607

Fac. ID No.	Call Sign	City	State	Service
61233	KSSU	DURANT	ОК	FM

Section II – Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 Documents

Licensee Respondents that hold authorizations for one or more full power television, AM, and/or FM stations should list all contracts and other instruments set forth in 47 C.F.R. Section 73.3613(a) through (c) for the facility or facilities listed on this report. If the agreement is a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee Respondents should select "Not Applicable" in response to this question.

Document Information		
Description of contract or instrument	Contract for lease of antenna space on tower.	
Parties to contract or instrument	Southeastern Oklahoma State University Mid Continental Broadcasting	
Date of execution	08/2013	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Lease of tower space.	

2. Ownership Interests

(a) Ownership Interests. This Question requires Respondents to enter detailed information about ownership interests by generating a series of subforms. Answer each question on each subform. The first subform listing should be for the Respondent itself. If the Respondent is not a natural person, also list each of the officers, members of the governing board (or other governing entity), stockholders, and any other persons or entities with a direct attributable interest in the Respondent pursuant to the standards set forth in 47 C.F.R. Section 73.3555. (A "direct" interest is one that is not held through any intervening companies or entities.) List each interest holder with a direct attributable interest in the Respondent separately.

Leave the percentage of total assets (Equity Debt Plus) field blank for an interest holder unless that interest holder has an attributable interest in the Respondent solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C.F.R. Section 73.3555, Note 2(i).

In the case of vertical or indirect ownership structures, list only those interests in the Respondent that also represent an attributable interest in the Licensee(s) for which the report is being submitted.

Entities that are part of an organizational structure that includes holding companies or other forms of indirect ownership must file separate ownership reports. In such a structure do not report, or file a separate report for, any interest holder that does not have an attributable interest in the Licensee(s) for which the report is being submitted.

Please see the Instructions for further detail concerning interests that must be reported in response to this question.

The Respondent must provide an FCC Registration Number for each interest holder reported in response to this question. Please see the Instructions for detailed information and guidance concerning this requirement.

Ownership Information				
FRN	0007180607	0007180607		
Entity Name	Southeastern Oklahom	na State University		
Address	РО Вох			
	Street 1	425 W. University BLVD		
	Street 2			
		'		

	City	Durant	
	State ("NA" if non-U.S. address)	OK	
	Zip/Postal Code	74701	
	Country (if non-U.S. address)	United States	
Listing Type	Respondent		
Positional Interests (check all that apply)	Respondent		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity		
Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one creport?	r more broadcast stations No	

Ownership Information		
FRN	9990134175	
Name	Connie Reilly	
Address	РО Вох	
	Street 1	3555 N.W. 58th Street
	Street 2	Suite 320
	City	Oklahoma City
	State ("NA" if non-U.S. address)	OK
	Zip/Postal Code	73112
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Retired educatior	
By Whom Appointed or Elected	Oklahoma Governor	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural	Gender	Female
Persons Only)	Ethnicity	Not Hispanic or Latino
	Race	White

Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a	an attributable interest in one oreport?	r more broadcast stations	No

Ownership Information			
FRN	9990134176		
Name	Susan Winchester		
Address	PO Box		
	Street 1	3555 NW 58th Street	
	Street 2	Suite 320	
	City	Oklahoma City	
	State ("NA" if non-U.S. address)	ОК	
	Zip/Postal Code	73112	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	President of Research Institute for Economic Developement		
By Whom Appointed or Elected	Governor		
Citizenship, Gender,	Citizenship	us	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a that do not appear on this	an attributable interest in one o	r more broadcast stations	No

Ownership Information		
FRN	9990134177	
Name	Jeffery Dunn	
Address	PO Box	

	Street 1	3555 NW 58th St	
	Street 2	Suite 320	
	City	Oklahoma City	
	•		
	State ("NA" if non-U.S. address)	ОК	
	Zip/Postal Code	73112	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	President CEO Millcreek Lumber		
By Whom Appointed or Elected	Gopvernor		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	No

Ownership Information			
FRN	9990134178		
Name	Lake Carpenter		
Address	PO Box		
	Street 1	3555 NW 58th St	
	Street 2	Suite 320	
	City	Oklahoma City	
	State ("NA" if non-U.S. address)	ОК	
	Zip/Postal Code	73112	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		

Principal Profession or Occupation	Senior VP, Bank of Western Oklahoma	
By Whom Appointed or Elected	Governor	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	0.0%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt Plus)	0.0%
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?		

Ownership Information			
FRN	9990134179		
Name	Gary Parker		
Address	PO Box		
	Street 1	3555 NW 58th St	
	Street 2	Suite 320	
	City	Oklahoma City	
	State ("NA" if non-U.S. address)	ОК	
	Zip/Postal Code	73112	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Director Oneok, Inc		
By Whom Appointed or Elected	Governor	Governor	
Citizenship, Gender,	Citizenship	us	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	

Total assets (Equi	ty Debt 0.0%	
Does interest holder have an attributable interest that do not appear on this report?	t in one or more broadcast station	s No

Ownership Information			
FRN	9990134180		
Name	Jane McDermott		
Address	РО Вох		
	Street 1	3555 NW 58th St	
	Street 2	Suite 320	
	City	Oklahoma City	
	State ("NA" if non-U.S. address)	ОК	
	Zip/Postal Code	73112	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Executive Director Northwestern Foundation Alumni Association		
By Whom Appointed or Elected	Governor		
Citizenship, Gender,	Citizenship	us	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

Ownership Information		
FRN	9990134181	
Name	Amy Anne Ford	
Address	PO Box	
	Street 1	3555 NW 58th St
	Street 2	Suite 320

	City	Oklahoma City		
	State ("NA" if non-U.S. address)	ОК		
	Zip/Postal Code	73112		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Member of Governing Board	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Partner, RedAnt, LLC	Partner, RedAnt, LLC		
By Whom Appointed or Elected	Governor	Governor		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	0.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have that do not appear on this	an attributable interest in one or	or more broadcast stations	No	

Ownership Information			
FRN	9990134182		
Name	Mark Stansberry		
Address	PO Box		
	Street 1	3555 NW 58th St	
	Street 2	Suite 320	
	City Oklahoma City State ("NA" if non-U.S. address)		
	Zip/Postal Code	73112	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Chairman Oklahoma Heritage Association		

By Whom Appointed or Elected	Governor		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	r more broadcast stations No		

Ownership Information				
FRN	9990134183			
Name	Joy Hofmeister			
Address	РО Вох			
	Street 1	3555 NW 58th St		
	Street 2	Suite 320		
	City	Oklahoma City		
	State ("NA" if non-U.S. address)	ОК		
	Zip/Postal Code	73112		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Superintendent of Public Instruction			
By Whom Appointed or Elected	Governor			
Citizenship, Gender,	Citizenship	us		
Ethnicity, and Race Information (Natural Persons Only)	Gender	Female		
	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	0.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		

Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?	No
(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable. If "No," submit as an exhibit an explanation.	Yes

(c) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?	No
If "Yes," complete the information in the required fields and submit an Exhibit fully describing that individual's duties and responsibilities, and explaining why that individual should not be attributed an interest.	

3. Organizational Chart (Licensees Only)

Attach a flowchart or similar document showing the Licensee's vertical ownership structure including the Licensee and all entities that have attributable interests in the Licensee. Licensees with a single parent entity may provide a brief explanatory textual Exhibit in lieu of a flowchart or similar document. Licensees without parent entities should so indicate in a textual Exhibit.

Non-Licensee Respondents should select "N/A" in response to this question.

The license is managed by the academic department of Art, Communication and Theatre at Southeastern Oklahoma State University. The university and its holdings are owned by the Regional University System of Oklahoma.

Section III - Certification

Certification

Section	Question	Response
Authorized Party to Sign	WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND /OR REVOCATION OF ANY STATION LICENSEOR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).	
Certification	I certify that I have examined this report and that to the best of my knowledge and belief, all statements in this report are true, correct and complete.	Official Title: Director of Broadcasting Exact Legal Title or Name of Respondent: Professor of Art, Communication and Theatre Name: Dell McLain Phone: 5807452290